ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALE	ID NO.	DATE	
FEE DETERMINATION	HL		3-19-01	
O.I.P.E. CLASSIFIER	RIW		MINA	
FORMALITY REVIEW	10	1027	04/24/01	
RESPONSE FORMALITY REVIEW	Zn.	927	05 (30/0)	
	Zm	927	07/25/01	

INDEX OF CLAIMS

~	Rejected	N	Non-elected
=	Allowed	- 1	Interference
_	(Through numeral) Canceled	Α	Appeal
·	Restricted	0	Objected Control

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Claim X	Date	Claim	Date	Claim	Date
Original		Final		Final	
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	++:+-+	68	 	118	
18 4		69	 	119	
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22		72 73	+ + + + + + + + + + + + + + + + + + + +	123	
23		74	 	124	++++++
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25	 	76	 	126	
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27 1		78	 	128	++++++++++
29	+++++	79	 	129	
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32	++++	82	+++++	132	
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37	 	87	+ + + +	137	
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45		95	 	145	┤╸╎╸┤╸┤ ╶┤╴ ┤ ╶
46	 	96	 	146	┤┤┤┤ ┼ ┤
47	 	97	 	147	
48	 	98	┤╸ ┤╶┤╴┤╶┤┈┤	148	
49	 	99	- - - - - - - - - - - - - - - - - - - 	149	
50	 - - - - 	100	 	150	
			 		

Best Available Copy

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)

